Statewide Trauma and Health Systems Training

Satellite Conference and Live Webcast
Monday, June 27, 2013
10:00 – 12:00 p.m. Central Time

Produced by the Alabama Department of Public Health
Video Communications and Distance Learning Division

Building a Statewide Stroke System in Alabama

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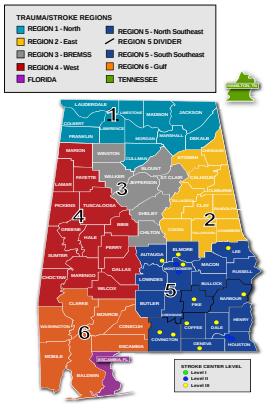

Goals

- **Primary Goal: To get lytic eligible patients with ischemic stroke to a center that can and will safely administer TPA when appropriate**
- **Secondary Goal: Facilitate transfers of stroke patients (both ischemic and hemorrhagic) when needed**

Ground Rules

- **Voluntary for hospitals, mandatory for EMS**
- **Patients identified by FAST Scale with allowance for EMSP Discretion**
- **Patient choice may override system IF patient is "competent to decide"**
- **Hospitals self-report availability in real time (red / yellow / green)**

Workstation Display

Trauma/Stroke Emergency Resources Display

Hospital	Level T	Level S	Level C	ED-T	ED	ANES	OR	X-RAY	TICU	TS	OS	NS	CT	SICU	NEURO	CCU	CARD	Club
A	1	1																
B	3	2																
C	3	2																
D	2	1																
E	1	2																
F	2	3																

Numbers are color-coded: Green for available, yellow for resource unavailable (but still accepting some patients), red for not available.
Hospital abbreviations are automatically color-coded for on-line status: Green for active, yellow for resource unavailable (but still accepting some patients

Alabama Trauma Communications Center

Stroke vs. Trauma

- **Both are "Time Dependent"**
- **Most smaller hospitals <u>don't</u> have resources to treat trauma**
- **Most smaller hospitals <u>do</u> have the resources to evaluate and begin thrombolytic treatment of stroke**

Data Collection

- **Paper form received by FAX in ED**
- **Paper form returned by FAX/email to communications center**
- **Patients identified by unique system generated number - NO NAMES**

Stroke Patient Report

TCC ID: 88888
Report Date: 01/03/2013
Report Time: 09:12:21

Hospital: University of Alabama Hospital 5
System: Birmingham Region

* Please do not place patient name on this report. *

Who is Entered into the Stroke System?

- **Patients with positive FAST screen or EMSP discretion = any acute neuro deficit that cannot otherwise be explained**
- **The patient is then routed to the nearest appropriate stoke system hospital**

What About Patients that don't come by EMS?

- They can be entered into the system by the Emergency Department staff
- Hospitals not participating in the stroke system can transfer patients with criteria for stroke by simply calling the ATCC

Three Level System

- Level 3: Acute Stroke Ready Hospital
- Level 2: Primary Stroke Center
- Level 1: Comprehensive Stroke Center

Regional Comparison

	BREMSS	Southeast
Population	217 persons/sq mile	80 persons/sq mile
Design	Single tier with neurologist readily available	3-tiered with lower levels utilizing phone/telemed
Triage tool	Cincinnati stroke scale +EMS discretion	Cincinnati stroke scale +EMS discretion
Communication	ATCC	ATCC
Stroke Hospitals	11	15 (4 Level II, 11 Level III)

Outcomes - 8/1/2012-5/3/2016

	BREMSS	Southeast
Patients	6345	5580
Data Reports	4987 (78.5%)	4325 (77.5%)
Accuracy	2301 (46%)	1676 (39%)
Hemorrhagic	508 (22%)	389 (23%)
Ischemic	1713	1235
TPA	322 (18.7%)	217 (17.6%)
Adverse Events	0	0
Admitted	4206 (84%)	3388 (78%)

QA / QI

- Voluntary participation in GWTG
- Mandatory 95% compliance for ATCC data reports
- Fax the report back to the ATCC within 48 hours
- The information is then entered into Lifetrac by the ATCC

Cost

- Central Communications Center
- Computer Workstation in Each Hospital
- ADPH Staff
- Regional Staff
- Site Visits/Travel
- NO $$ to hospitals
- NO $$ for robust data system such as GWTG

Current Challenges

- **Telemedicine vs Telephone: limited availability of neurologists and limited access to telemedicie**
- **Some ED physicians still resistant to giving TPA**
- **Keep the neurosurgeons happy - don't abuse them!**
- **Statewide implementation**

Pitfalls to Watch For

- **Be inclusive in planning**
- **Consequences for Noncompliance**
- **Don't skimp on education**
- **Face time and relationships are priceless**